ONE HUNDRED SIXTEENTH CONGRESS

Congress of the United States

House of Representatives

COMMITTEE ON ENERGY AND COMMERCE

2125 RAYBURN HOUSE OFFICE BUILDING WASHINGTON, DC 20515-6115

Majority (202) 225–2927 Minority (202) 225–3641 March 18, 2019

Dr. Anthony S. Fauci Director National Institute of Allergy and Infectious Diseases National Institutes of Health 5601 Fishers Lane Rockville, MD 20852

Dear Dr. Fauci:

Thank you for appearing before the Subcommittee on Oversight and Investigations on Wednesday, February 27, 2019, at the hearing entitled, "Confronting a Growing Public Health Threat: Measles Outbreaks in the U.S." We appreciate the time and effort you gave as a witness before the Subcommittee on Oversight and Investigations.

Pursuant to Rule 3 of the Committee on Energy and Commerce, members are permitted to submit additional questions to the witnesses for their responses, which will be included in the hearing record. Attached are questions directed to you from certain members of the Committee. In preparing your answers to these questions, please address your response to the member who has submitted the question and include the text of the member's question along with your response. Because you have been asked questions from more than one member of the Committee, please begin the response to each member on a new page.

To facilitate the printing of the hearing record, your responses to these questions should be received no later than the close of business Monday, April 1, 2019. As previously noted, this transmittal letter and your responses, as well as the responses from the other witness appearing at the hearing, will all be included in the hearing record. Your written responses should be emailed to Jourdan Lewis with the Committee staff at jourdan.lewis@mail.house.gov. Please provide your response in a single Microsoft Word formatted document, as well as a PDF document.

Dr. Anthony S. Fauci Page 2

Thank you for your prompt attention to this request. If you need additional information or have other questions, please contact Jourdan Lewis at (202) 225-2927.

Sincerely,

Frank Pallone, Jr.

Chairman

Attachments

cc: Hon. Greg Walden, Ranking Member Committee on Energy and Commerce

> Hon. Diana DeGette, Chair Subcommittee on Oversight and Investigations

> Hon. Brett Guthrie, Ranking Member Subcommittee on Oversight and Investigations

The Honorable Frank Pallone Jr. (D-NJ)

- 1. The Centers for Disease Control and Prevention (CDC) has determined that receiving the measles, mumps, and rubella vaccine—known as the MMR vaccine—is safer than getting any of the viruses. CDC notes, however, that as with any medication, there is a chance of adverse reaction.
 - a. What range of adverse reactions are associated with the MMR vaccine?
 - b. Under what circumstances have more severe reactions been documented?
 - c. Does the National Institutes of Health concur with CDC's determination that the risks associated with acquiring measles, mumps, or rubella are greater than the possible reactions from the MMR vaccine?

The Honorable Jan Schakowsky (D-IL)

1. When outbreaks occur, our most pressing concern is often an immediate response. However, I believe that we also must reflect on our nation's progress in prevention of vaccine preventable diseases. The Department of Health and Human Services (HHS) Healthy People objectives for immunization and infectious disease are a cornerstone for federal, state, and local efforts to protect against vaccine preventable conditions across the lifespan.

I was surprised to learn that the draft Healthy People 2030 objectives include very few immunization objectives in total. At a time when we are seeing increased outbreaks of diseases that were already virtually eliminated in this country, could you explain the rationale behind the reduction in immunization objectives in the draft Healthy People 2030 framework? Do you plan to restore these objectives moving forward?

The Honorable Brett Guthrie (R-KY)

- 1. In May 2015, the journal Science published a report in which researchers found that the measles infection can leave a population at an increased risk for mortality from other diseases for two to three years. Besides this report, is there evidence that measles increases susceptibility to other infections?
- 2. What are antigens? How much are used in MMR vaccine? How does that small amount compare to the antigens that are encountered in the environment?
- 3. What is your professional judgment of the likely public-health impact of state vaccination exemptions based on personal or professional beliefs?
- 4. What has your institute learned from research about why measles spreads so efficiently? How will this improved understanding help develop novel therapeutic strategies?
- 5. What does the research so far show about using a third dose of MMR vaccine to further boost the immune response?
- 6. Is there reason to believe that there are differences in immune responses between sexes?
- 7. What is the concern with "waning immunity," and how can it be addressed?
- 8. Why are there no antiviral therapies currently available to treat measles? Is it because it is particularly challenging or a lack of market interest?

The Honorable Michael C. Burgess, M.D. (R-TX)

- 1. What steps can parents take to best protect their children from infectious diseases like measles?
- 2. What are some of the side effects associated with measles, and how often do these occur?
- 3. Some people say that measles is not serious and did not cause great harm in the past. Can you talk about the historic impact of measles in the past both in the U.S. and globally?